SUPPLEMENT

TO THE

BRITISH MEDICAL JOURNAL.

LONDON: SATURDAY, FEBRUARY 6TH, 1909.

CONTENTS.

	PAGE
MEETINGS OF BRANCHES AND DIVISIONS:	
Lancashire and Cheshire Branch: Manchester (West) Division	61
" " " " Preston Division	62
Metropolitan Counties Branch: Hampstead Division	62
" " " Kensington Division	62
North of England Branch: North Northumberland Division	62
South Midland Branch: Northants Division	63
ASSOCIATION NOTICES	63
VITAL STATISTICS:	
REGISTRAR-GENERAL'S ANNUAL REPORT	64
NAVAL AND MILITARY APPOINTMENTS	65
HOSPITALS AND ASYLUMS:	
Belfast Hospital for Sick Children	66
Manchester Royal Eye Hospital	66
Bradford Children's Hospital	66
Down District Lunatic Asylum, Downpatrick	66
Brighton Throat and Ear Hospital	66
VACANCIES AND APPOINTMENTS	66
BIRTHS, MARRIAGES, AND DEATHS	67
DIARY FOR THE WEEK	67
CALENDAR	68

Meetings of Branches & Divisions.

[*The proceedings of the Divisions and Branches of the Association relating to Scientific and Clinical Medicine, when reported by the Honorary Secretaries, are published in the body of the* JOURNAL.]

LANCASHIRE AND CHESHIRE BRANCH:
MANCHESTER (WEST) DIVISION.

A GENERAL meeting of the Division was held at the Technical Institute, Stretford Road, on Tuesday, January 19th. Dr. F. H. WORSWICK was, in the absence of the Chairman and Vice-Chairman, voted into the chair.

Apologies for Non-attendance.—A letter from Dr. A. Brown Ritchie, expressing regret at his inability to attend the meeting, was read.

Confirmation of Minutes.—The minutes of the last meeting were read and adopted.

Appointment of Representative on Branch Council.—The HONORARY SECRETARY reported that Dr. F. H. Worswick had been appointed by the Executive Committee as one of the Representatives on the Branch Council, vice Dr. J. Brassey Brierley, who had resigned.

A Local Trade Provident Society.—A letter from the Sheffield Division, asking for support in the attitude taken by that Division towards a local trade provident society, was read. The meeting instructed the Honorary Secretary to acknowledge the communication, and state that the Division is in agreement with the position taken.

Friendly Societies and the Medical Profession.—The Honorary Secretary was requested to thank the Medical Secretary for his letter concerning the conference arranged by the Charity Organization Society to discuss a paper by Dr. Pearse, of Trowbridge, on Friendly Societies and the Medical Profession.

The Action of Branches and the Charter.—The report from the Organization Committee, embodying counsel's opinion upon the legality of the action of Branches and Divisions, in calling meetings and spending money for the purpose of opposing the application for the Royal Charter, was read and discussed. The following resolution (proposed by Dr. PROWSE, and seconded by Dr. SCANLON) was unanimously agreed to:

> That this meeting, in view of the facts that *(a)* much dissatisfaction exists throughout the Association in regard to the clauses of the Charter dealing with the Referendum; and that *(b)* no action can at present legally be taken by any Branch or Division, to alter such clauses—is of opinion that a conference of leading members of the Association should be convened at an early date to consider the possibility of arriving at some agreement on the questions involved, and of formulating the best method of giving force to such agreement as soon as practicable after the granting of the Charter.

Notification of Births.—A letter from the Medical Guild, pointing out that in connexion with the Early Notification of Births Act the authorities can claim no legal right of entry for the nurses into patients' houses, and suggesting that medical men attending confinements should inform their patients of this fact, was ordered to be laid on the table.

Joint Committee of Manchester and Salford Divisions.—In answer to a request from the Joint Committee of the Manchester and Salford Divisions, it was resolved that the honorary secretaries shall send reports to that committee of the Division's opinions and decisions in regard to the medical inspection and treatment of school children and other matters of interest dealt with at the meetings of the Division.

Workmen's Compensation Act.—The following resolution, forwarded in a communication from the Manchester and Salford Joint Committee, was unanimously adopted by the meeting:

> That in all compensation cases the medical man attending ought to receive notice of the intended visit of a medical referee sent by insurance and other companies.

The communication from the Hospitals Committee in regard to the giving of certificates from hospitals was then considered, and it was resolved that Dr. Prowse be requested to reply to the questions asked in connexion with the Hulme Dispensary, which is the only institution concerned in the Division.

Representatives at Representative Meeting.—The consideration of the circular from the Organization Committee in respect to the earlier election of the Representative to the Representative Meeting was referred to a future meeting.

Consultations and General Practitioners.—The meeting then appointed six members as representatives of the Division to serve on a subcommittee appointed by the Joint Committee of the Manchester and Salford Divisions, to consider the "ethical relations between consultants and general practitioners." The following gentlemen were elected: Sir W. J. Sinclair, Dr. E. Holgate Owen, Dr. A. M. Edge, Dr. F. H. Worswick, Dr. Floyd (Chairman of Division), and Dr. Farrow.

Medical Inspection and Treatment of School Children.—The report of the Medico-Political Committee *re* certain points in connexion with the medical inspection and treatment of school children was carefully considered, and the

Executive Committee was instructed to draw up a detailed report of the decisions arrived at by the meeting.

Report on Annual Representative Meeting.—The REPRESENTATIVE of the Division (Dr. Prowse) gave an account of the Annual Representative Meeting held at Sheffield, and a short summary of some of the more important decisions which had been come to by that meeting.

PRESTON DIVISION.

A MEETING of this Division was held on Wednesday, January 27th, Dr. R. C. BROWN, President, in the chair.

Medical Inspection of School Children.—The Medico-Political Report was read and considered. After considerable discussion it was unanimously resolved that the Division:

1. Approves of payment per head for part-time officers with a minimum fee of 2s. 6d., and that extra work—for example, reports, etc.—be paid for.
2. Treatment. The Division unanimously agreed with the propositions of Dr. A. H. Williams, of Watford and Harrow.

British Medical Benevolent Fund.—Dr. Talbot drew the attention of members to the British Medical Benevolent Fund and asked for more support to this charity.

METROPOLITAN COUNTIES BRANCH:

HAMPSTEAD DIVISION.

A MEETING of this Division was held on Tuesday, January 26th, at 5 p.m., at St. Peter's Hall, Belsize Square, N.W., Dr. OPPENHEIMER in the chair.

Annual Report to the Branch.—The HONORARY SECRETARY read the annual report to the Branch for 1908. The total membership had increased from 192 on December 31st, 1907, to 199 on December 31st, 1908. There had been eleven meetings of the Division, with an average attendance of 18. The chief question of local interest was the Hampstead Hospital dispute. The out-patient department in Hampstead had been nominally abolished.

Financial Report.—The total expenditure for 1908 was £35 17s. 6½d., of which £28 3s. 1½d. was for ordinary expenditure and £7 14s. 5d. for extraordinary expenditure in connexion with the hospital dispute. There was on December 31st, 1908, a total deficit of £6 18s. 8½d., of which £3 18s. 5d. (extraordinary expenditure) had since been paid by the Branch, leaving £3 0s. 3½d. deficit on the ordinary expenditure account. This deficit was due in part to heavy expenditure in the hire of rooms and to other smaller items. The report was approved.

Medical Inspection of School Children.—The report of the Medico-Political Committee of the Association on the medical inspection of school children and the treatment of those found defective was considered. In answer to Question 1 (*a*) on page 11, the committee recommended the following resolution:

1. That this Division does not approve of the system of payment per head.

Dr. P. C. EVANS said that in Willesden Green payment per head had been agreed upon by the local practitioners. After some discussion the committee's recommendation was put to the vote and carried *nem. com.* With regard to the treatment of school children found defective, the committee brought forward the following resolution:

2. That destitute school children should be referred to a medical department organized by the State for the treatment of the destitute poor.

Mr. H. W. ARMIT moved an amendment, seconded by Dr. CLAUDE TAYLOR:

That this Division supports the institution of school clinics.

Mr. Armit said that the resolution recommended by the committee came very nearly to the same thing as supporting school clinics. He did not think that clubs and private practitioners could treat the children adequately. The London County Council had determined to have school clinics. They need not pauperize. Parents would be required to pay, and the medical officers would be paid. The profession as a whole would get definite payment. General practitioners should sink their private interests for the benefit of the race. He strongly approved of the institution of school clinics. Dr. CLAUDE TAYLOR agreed with Mr. Armit. He thought that the profession need not fear financial loss, but would be directly and indirectly benefited. The school clinic would so educate the children that in after-life they would pay better attention to their health and be more likely to take medical advice if they became out of health. Mr. CUNNINGTON objected to school clinics as having a Socialist tendency. He approved of medical inspection being organized by the State, but treatment should not be at the expense of the State save in the case of destitute children. In Hampstead nine-tenths of these school children belonged to clubs, friendly societies, etc., and their parents could afford to pay and did pay something for their treatment. Miss DOBBIE, in supporting the amendment, said that treatment in school clinics need not necessarily be free. She gave an example of the neglect of treatment which might follow the reference of cases to general practitioners. In this case a general practitioner had refused to sanction a necessary operation advised by a specialist, with the result that the child had suffered for six years longer from ill-health due to his neglect. The CHAIRMAN pointed out that even if school clinics were instituted, nothing could prevent the parents taking a child to a general practitioner, who might refuse to sanction an operation advised by the medical officer of the school clinic. Dr. MACEVOY thought that it would be much better if the London County Council would help existing institutions instead of founding new ones. The provident dispensaries, if properly equipped, could do this work perfectly well. General practitioners nowadays were quite competent to remove adenoids, treat running ears, and do refractions. Mr. PARSONS, in supporting the committee's resolution, said the whole question was a political one. If children were to have medical treatment provided free by the State, why not supply them with boots free, and so on? It was the duty of the parents to provide these things for their children. The general practitioner was in danger of passing out of existence if school clinics were established. Mr. JESSOP said that the opinion of a general practitioner as to a throat case, for example, might be as good as, or better than, the opinion of a young medical officer to a school clinic. The school clinic would become nothing but a glorified huge out-patient department. Mr. Armit's amendment having been put to the vote and lost, the committee's resolution was agreed to. A third resolution was also carried as tending to safeguard the interests of the private practitioner:

3. That this Division approves of the form given on page 6, paragraph 10 of the report.

(That is, paragraph 7 (*d*) Board of Education's Memo. 596.) No other suggestions were made.

KENSINGTON DIVISION.

A MEETING of this Division was held at the Kensington Town Hall on January 21st, at 5 p.m., Dr. RICE OXLEY, the Chairman of the Division, in the chair.

Confirmation of Minutes.—The minutes of the last meeting were read and confirmed.

Paper.—Mr. LEONARD A. BIDWELL, Surgeon to the West London Hospital, read a paper on the immediate and ultimate results of the operation of gastro-enterostomy for gastric and duodenal ulcer. (This paper will be reported in the JOURNAL.) Dr. RICE OXLEY thanked Mr. Bidwell for his interesting and instructive address, and referred to several points. The discussion was continued by Dr. LEWIS SMITH, who was present on the invitation of the Chairman, and by Dr. A. D'E. VALLANCEY, Dr. CRAWFORD THOMSON, Dr. C. H. BENNETT, the HONORARY SECRETARY, and others. Mr. BIDWELL replied to the matters raised by the speakers.

Vote of Thanks.—Dr. BUTTAR proposed a hearty vote of thanks to Mr. Bidwell for his address. This was seconded by Dr. CRICHTON, and carried with acclamation.

NORTH OF ENGLAND BRANCH:

NORTH NORTHUMBERLAND DIVISION.

A MEETING was held at the Infirmary, Berwick-on-Tweed, on January 28th; Dr. MACKAY occupied the chair. There were also present Drs. Macaskie, Dey, Wilson, Coldstream, Robson, Paxton, Badcock, and Burman.

Apologies for Non-attendance.—Apologies for non-attendance were received from Drs. Main and Purves.

Confirmation of Minutes.—The minutes of the last meeting were read and confirmed.

Midwives and the County Council.—The SECRETARY reported what had been done in connexion with the proposed introduction of midwives by the County Council, and read correspondence. The meeting thanked the Secretary for the work he had undertaken in relation to this question.

Appointment of Medical Inspector of School Children.—The CHAIRMAN reported that the post of medical inspector of school children had been accepted by a member of the Division after consultation with the resident practitioners and subject to certain conditions mutually agreed upon and embodied in a legal agreement. The meeting considered this a most satisfactory arrangement.

Fees for Life Insurance Examinations.—Dr. MACKAY announced that in the case of one of the insurance offices whose fee the Division had previously decided should be one guinea, having tendered only half a guinea, he had referred the office to the decision of the members, and in consequence the full amount of one guinea had been received.

An Unregistered Dentist.—The SECRETARY read a correspondence with the unregistered dentist whose case was mentioned at last meeting. A discussion followed, and it was agreed that while any serious emergency should be treated, great care ought to be taken by members to avoid any suggestion of association or co-operation in his work.

Certificates from Hospitals.—The circular of the Hospitals Committee *re* "Certificates from Hospitals" had been forwarded to the two infirmaries in the Division, and the replies received had been transmitted to the Medical Secretary, and acknowledged by him.

Medical Inspection of School Children.—The report of the Medico-Political Committee on the medical inspection of school children was fully discussed, and the Secretary was instructed to answer the questions in accordance with the decision of the meeting, as follows:

1. (*a*) This Division, having decided upon *whole-time* officers, considers the payment of same can only be settled upon a fixed annual salary.
2. Agreed that treatment of school children found defective should be paid for by *case* at fees according to the local rates of professional charge.
3. That the local practitioners should be asked to treat the cases, or if any hospital treatment is required to advise the same. School clinics not favoured by Division. No special practitioner to be selected.
4. When parents cannot afford to pay, the Education Committee should be responsible for any fees incurred.

Public Health Committee.—The following answer to the questions propounded in this report was agreed to:

In this Division the medical officers of health are all genera practitioners, and unless the area were rearranged, and only one or two officers appointed, a whole-time officer could not be supported. The scanty population and rural districts seem better served as at present.

Rheumatoid Arthritis.—Dr. WILSON (Glanton) read a most interesting and instructive paper on rheumatoid arthritis. The CHAIRMAN expressed the thanks of the meeting, and a discussion followed in which several members took part. The members were afterwards entertained by the Chairman.

SOUTH MIDLAND BRANCH:

NORTHANTS DIVISION.

ON January 26th a meeting of the Division was held in the Board Room of the Northants General Hospital. The meeting was preceded by luncheon at Franklin's Restaurant. Mr. C. J. EVANS was in the chair, and the other members present were: Drs. McCrindle, Odgers, Linnell, Greenfield, Terry, Darley, J. S. Stewart, Grindon, Jacobs, Robb, Baxter, Burt, Hichens, Harries-Jones, Milligan, Godwin, Stone, Pearson, and Pemberton.

Confirmation of Minutes.—The minutes were read and confirmed.

Results of Operative Treatment for Cancer.—Dr. THOMAS WILSON (Birmingham) then kindly gave a very interesting address on "The Results of Operative Treatment for Uterine Cancer." He emphasized the fact that, despite all the research there had been, the real cause of cancer was not known, but it was known that it was at first local, and then spread externally to the surface and internally through the lymphatic spaces to the lymphatic glands. In cervical cancer the parametrium at the base of the broad ligament was very early involved, and the lymphatic gland early in two-thirds of the cases, but only one-third of these showed cancer cells on microscopic examination. As regards operation, improvement in results might be expected from earlier recognition of the disease or from wider operation. Unfortunately the really early stage was probably unrecognizable, what were called early symptoms being really a sign of an advanced stage of the disease. Wider operations can be made by the abdominal route, but at present the mortality was much higher than by the vaginal route. From 1896 to 1908 he had operated on 103 cases of uterine cancer—62 vaginal operations, with 1 death; 41 abdominal operations, with 10 deaths. In considering final results, he took five years' freedom from recurrence as equivalent to a cure. In taking them till the end of 1903, he found that 40 cases were still alive and strong (about 27 per cent.). He found 40 out of 107 cases seen justified an operation in a little over 20 per cent. He thought the best results in the future would be obtained from the abdominal operation. He then emphasized the importance of paying attention to the earliest symptoms. The paper was discussed by Drs. STONE, MULLIGAN, and HICHENS, and Dr. WILSON was heartily thanked for his kindness in coming from Birmingham and delivering so interesting an address.

Annual Representative Meeting.—Dr. BAXTER then read a valuable report of the Representative Meeting of last summer.

Revision of Divisional Rules.—The question of revising the Divisional rules was then discussed, and on the motion of Dr. HICHENS, seconded by Dr. BAXTER, they were referred to the Divisional Council for consideration.

Medical Inspection and Treatment of School Children.—The medical inspection and treatment of school children was then discussed at considerable length by many members, and the Division unanimously passed the following resolutions, which were proposed by Dr. HICHENS, seconded by Dr. LINNELL:

1. That whole-time officers be appointed at an annual salary.
2. That, as regards the treatment of school children, the Division does not feel that enough is yet known on the subject to enable it to come to any definite or useful conclusion.

Friendly Societies and the Medical Profession.—A letter was read from Mr. Smith Whitaker inviting the Division to send a delegate to a Charity Organization Conference on Friendly Societies and the Medical Profession. It was not found possible to appoint a delegate.

Proposed Alteration of Boundaries of Divisions.—A letter was then read from Dr. Larking of Buckingham, asking whether the Division would consent to an alteration of its boundaries—diminishing its size and enlarging the Aylesbury Division. The matter was referred for consideration to the Divisional Council.

Midwives Act.—The following resolution, proposed by Dr. BAXTER, seconded by Dr. MILLIGAN, and supported by Dr. ROBB, was passed unanimously, and sent to the Central Council for consideration at its meeting on January 27th:

The meeting of the Northants Division urges on the Central Council the desirability of approaching the Departmental Committee, now sitting, to consider the working of the Midwives Act, with a request for direct representation of the British Medical Association on the Central Midwives Board.

During the meeting tea was kindly provided for the members by the Chairman.

☞ *To ensure the insertion of notices in this column, they must be received at the Central Offices of the Association not later than the first post on Tuesday.*

Association Notices.

BRANCH AND DIVISION MEETINGS TO BE HELD.

EDINBURGH BRANCH.—The winter clinical meeting of the Edinburgh Branch will be held in the Royal Infirmary, Edinburgh, on Friday, February 26th, at 4 p.m. The members of the other Scottish Branches are invited to attend the meeting. The museum will be open at 11 a.m., and special clinics will be held during the forenoon. Dinner in the Royal British Hotel,

Princes Street, at 6.30 p.m.; morning dress; dinner ticket, 5s.—A. LOGAN TURNER, FRANCIS D. BOYD, Honorary Secretaries.

LANCASHIRE AND CHESHIRE BRANCH.—The Branch Council will meet at the Medical Institution, Liverpool, on Wednesday, February 10th, at 4.30 p.m.—F. CHARLES LARKIN, Honorary Secretary.

LANCASHIRE AND CHESHIRE BRANCH: ALTRINCHAM DIVISION.—A general meeting of the Division will be held at 5 p.m. on Wednesday, February 17th, at the Brooklands Hotel. The meeting will be a special meeting under Rule 14, for the purpose of amending Rule 8 (election of Representative), and of considering the adoption of new rules (namely, "Bradford" Rule, and Rule Z), copies of which have been sent by post to each member. In the ordinary meeting Dr. Rhodes will read a paper, and the usual general business will be taken.—T. W. H. GARSTANG, Honorary Secretary.

LANCASHIRE AND CHESHIRE BRANCH: MANCHESTER (WEST) DIVISION.—A meeting of this Division will be held at the Technical Institute, Stretford Road, Old Trafford, on Tuesday next, February 9th, at 4 p.m. Members are urgently requested to attend.—J. SKARDON PROWSE, L. E. STANTON, Honorary Secretaries.

LEINSTER BRANCH.—The annual general meeting will be held on Saturday, February 13th, in the Royal College of Physicians, Kildare Street, Dublin, at 4.30 p.m. The annual dinner will be held in the College Hall at 7.30 p.m of the same day.—ARTHUR H. WHITE, Honorary Secretary.

MIDLAND BRANCH: LEICESTER AND RUTLAND DIVISION.—A meeting of the Division will be held at the Leicester Infirmary on Wednesday, February 10th, at 4 p.m. Agenda: Minutes of previous meeting. Discussion of certain questions relating to medical inspection of school children. Paper by Dr. R. W. W. Henry on Some of the Commoner Affections of the Eye and their Treatment. Cases illustrating the subject of the paper will be shown. Any other business.—WILFRED E. GIBBONS, Honorary Secretary, Leicester.

SOUTH-EASTERN BRANCH: FOLKESTONE DIVISION.—A meeting of the Folkestone Division will be held at the Hotel Wampach, Folkestone, on Saturday, February 13th, at 8.15 p.m. Agenda: (1) The Division is requested to express its opinion for or against the following proposition: "That medical officers of health should be debarred from engaging in private practice"; and to add any qualifications, comments, or additional suggestions bearing on the matter which it may desire. (2) Medical inspection of school children (system of payment). (3) A letter from the Secretary of the Branch *re* police fees. (4) As to the advisability of dividing the South-Eastern Branch. All members of the South-Eastern Branch are invited to attend and introduce professional friends.—P. VERNON DODD, Honorary Secretary, Folkestone.

SOUTH MIDLAND BRANCH: BEDFORD AND HERTS DIVISION.—A meeting of the Division will be held at Bedford County Hospital, Bedford, at 3 p.m., on Thursday, February 11th, Dr. S. F. Dixon in the chair. Agenda: (1) Minutes. (2) Revision of Divisional Rules. (3) Consideration of the Report of Medico-Political Committee on the Medical Inspection of School Children. Members wishing to read papers or show cases are requested to communicate with the Secretary as soon as possible.—E. H. COBB, Honorary Secretary, Belmont, Stevenage.

STAFFORDSHIRE BRANCH.—The second general meeting of the session will be held at the North-Western Hotel, Stafford, on Thursday, February 25th. The President, Dr. S. King Alcock, will take the chair at 5.15 p.m. Business: (1) Minutes of the last ordinary general meeting. (2) Correspondence. (3) Exhibition of living cases. (4) Paper: Mr. A. B. Cridland, Internal Squint in Children. (5) Paper: Mr. J. T. Hartill, Short Notes on a Rare and Interesting Case of Retention of Menses, and Operations for and Relief of the Symptoms. (6) Exhibition of pathological specimens, etc. Dinner 7.15 p.m., charge 5s.—G. PETGRAVE JOHNSON, Honorary General Secretary, Stoke-on-Trent.

Vital Statistics.

THE REGISTRAR-GENERAL'S ANNUAL REPORT.

THE vital statistics of England and Wales for the year 1907 are shown in detail, and are fully analysed in the Annual Report just published by the Registrar-General. Provisional numbers of marriages, births, and deaths, tabulated from the quarterly returns made by the local registrars, were available in May last, when they were published in the Registrar-General's Annual Summary; the present volume, however, is compiled from the individual entries in the registers, and the figures are much more fully discussed than was possible in the earlier publication. Additional tables have been included in this report giving rates of mortality from certain causes in several foreign countries; and appended to the Report is a note showing a new method of estimating populations for parts of the country in intercensal years.

MARRIAGE-RATE.

The number of marriages registered in England and Wales during 1907 was 276,421, being equal to an annual rate of 15.8 persons married per 1,000 of the total population, which was estimated to be 34,945,600 persons in the middle of the year. This rate is somewhat higher than the average thirty years earlier (1876-80), but if the rates are calculated on the marriageable population—that is, unmarried and widowed persons above 15 years of age—and are further corrected for differences in the age-constitution of this population at the two periods, it will be found that the marriage-rate has declined by 10.4 per cent. It may also be noted that, although the proportion of remarriages among both widowers and widows has greatly declined, remarriages of divorced persons are much more numerous than they were formerly.

BIRTH-RATE.

The births registered in England and Wales during the year under notice numbered 918,042, and were at the rate of 26.3 per 1,000 of the total population. Since 1876 the birth-rate has declined almost uninterruptedly, and in 1907 the rate was, for the tenth year in succession, the lowest on record since 1837, in spite of the fact that until 1875 birth registration was incomplete. Among the several counties the lowest legitimate birth-rates were recorded in Sussex, Surrey, Devonshire, and Hampshire; and the highest rates in Northumberland, Staffordshire, Glamorganshire, Durham, and Monmouthshire. Generally speaking the fertility of wives in rural districts is about 7 per cent. greater than that of wives in towns. The decrease in the total birth-rate already referred to has been accompanied by a still greater decrease in the proportion of illegitimate births; such births, which in 1876-1880 were at the annual rate of 14.4 per 1,000 unmarried and widowed females aged 15 to 45 years, had declined to 7.8 per 1,000 in 1907. Compared with other European countries England and Wales had in 1901-5 a higher birth-rate than Belgium, Sweden, Ireland, or France.

DEATH-RATE.

The number of deaths registered in England and Wales in 1907 was 524,221, corresponding to a rate of 15.0 per 1,000 of the population; this rate is the lowest on record, being 1.7 per 1,000 below the mean rate for the ten years 1897-1906. The death-rates in the several counties, after correction for differences of sex and age constitution of their respective populations, ranged from 9.7 in Radnorshire, 10.5 in Rutlandshire, 11.0 in Huntingdonshire, 11.2 in Buckinghamshire and in Westmorland, and 11.4 in Northamptonshire, to 16.7 in Monmouthshire, 16.8 in the West Riding of Yorkshire, 17.2 in the North Riding, 17.4 in Glamorganshire, 17.8 in Durham, and 18.8 in Lancashire.

The proportion of deaths among children under 1 year of age to registered births was equal to 118 per 1,000, against an average of 145 per 1,000 in the ten preceding years. The rate for 1907 is the lowest on record, the saving of infant life being most marked in the third quarter of the year, when the rate of infant mortality fell to the remarkable figure of 99 per 1,000, or 88 less than the decennial average; among the several counties the rates ranged from 77 in Wiltshire and in Dorsetshire, 80 in Hertfordshire, 83 in Berkshire, and 84 in Buckinghamshire, to 133 in Staffordshire, 135 in Durham, 136 in Glamorganshire, 138 in Lancashire, and 146 in Nottinghamshire.

Of the 524,221 deaths, the causes of 480,151 were certified by registered medical practitioners; inquests were held in 36,474 cases, while the causes of 7,596 deaths were not certified. The proportion of uncertified deaths is, however, steadily declining, and in 1907 was the lowest on record.

CAUSES OF DEATH.

With regard to the more important causes of death, it appears that much of the saving of life represented by the low death-rate of 1907 was due to the lessened fatality of diarrhoeal diseases, a result in a large measure of the cool

and showery summer of that year. Among the principal epidemic diseases the mortality from measles exceeded the average; from diphtheria it was somewhat below the average; while from scarlet fever and from enteric fever it was the lowest on record. From tuberculous diseases the mortality was less than the average, and it is observed that for the first time in the last fifteen years the mortality from cancer showed a decline from that in the year immediately preceding. The death-rate from influenza was 265 per million living, which is higher than that in any other year since 1900. Pneumonia caused a death-rate of 1,344 per million living, the rate in the selected urban counties being 1,588 per million, against 871 in the selected rural counties. The death-rate from phthisis for both sexes was 1,140,—for males 1,341, and for females 952 per million, all these rates being slightly lower than the average. From cancer the mortality was 2,401 per million among males above 35 years of age, 3,033 per million among females of the same ages, and 2,734 for both sexes, the excess in women being due to their greater liability to fatal cancer of the generative and mammary organs; all these rates are slightly in excess of those for the quinquennium, 1902–06. The recorded mortality from alcoholism continues to decline, the rate in 1907 among persons above 25 years of age being only about 70 per cent. of that in the previous ten years.

In 48,979 cases the causes of deaths were described too indefinitely to admit of their proper classification. Such cases would have been still more numerous but for the inquiries addressed to medical practitioners respecting deaths certified as due to tumour, dropsy, gangrene, haemorrhage, etc. With reference to the deaths in the year under notice, 4,166 replies to such inquiries were received, and in many instances enabled the deaths to be referred to their appropriate headings. For example, 587 deaths were transferred from indefinite causes to malignant disease, 504 to tuberculous diseases, and 117 to puerperal septic diseases.

HEALTH OF ENGLISH TOWNS.

In seventy-six of the largest English towns, including London, 7,657 births and 5,665 deaths were registered during the week ending Saturday last, January 30th. The annual rate of mortality in these towns, which had been 17.5, 16.6, and 15.7 per 1,000 in the three preceding weeks, rose again last week to 18.0 per 1,000. The rates in the several towns ranged from 5.2 in Handsworth (Staffs), 6.8 in Willesden, 8.0 in East Ham, 9.3 in Hornsey, 9.9 in Barrow-in-Furness, and 10.3 in Wallasey, to 23.5 in Liverpool, 23.6 in Sunderland, 23.7 in Oldham, 23.9 in Manchester, 24.2 in Wigan, 26.4 in Bury and in Huddersfield, and 30.8 in Swansea. In London the rate of mortality was 17.8 per 1,000, while it averaged 18.1 per 1,000 in the seventy-five other large towns. The death-rate from the principal infectious diseases averaged 1.5 per 1,000; in London the rate from these diseases was 1.6 per 1,000, while among the seventy-five other towns the rates ranged upwards to 3.1 in West Ham, 3.2 in Sheffield, 3.3 in West Hartlepool, in Sunderland, and in Merthyr Tydfil, 4.0 in Warrington, 4.3 in Rotherham, 4.4 in Bury, and 5.9 in Middlesbrough. Measles caused a death-rate of 2.0 in Sheffield, 2.2 in Warrington, 2.3 in West Ham and in Sunderland, 2.4 in Rotherham, 2.6 in West Hartlepool, and 4.0 in Middlesbrough; diphtheria of 1.3 in Merthyr Tydfil, 1.4 in Warrington, and 1.9 in Tynemouth; and whooping-cough of 1.1 in Walthamstow and in St. Helens, 1.2 in Wigan, 1.6 in Swansea, and 2.6 in Bury. The mortality from scarlet fever, from enteric fever, and from diarrhoea was not excessive in any of the large towns, and no fatal cases of small-pox were registered during the week. The number of scarlet fever cases remaining under treatment in the Metropolitan Asylums Hospitals and the London Fever Hospital, which had been 3,347, 3,261, and 3,211 at the end of the three preceding weeks, had further declined to 3,201 at the end of last week; 339 new cases were admitted during the week, against 323, 358, and 379 in the three preceding weeks.

HEALTH OF SCOTTISH TOWNS.

DURING the week ending Saturday last, January 30th, 934 births and 616 deaths were registered in eight of the principal Scottish towns. The annual rate of mortality in these towns, which had been 18.1 and 18.8 per 1,000 in the two preceding weeks, fell again to 17.2 per 1,000 last week, and was 0.8 per 1,000 below the mean rate during the same period in the seventy-six large English towns. Among these Scottish towns the death-rates ranged from 11.6 in Leith and 11.7 in Perth to 18.0 in Glasgow and 18.5 in Dundee. The death-rates from the principal infectious diseases averaged 2.0 per 1,000 in these towns, the highest rates being recorded in Glasgow and Aberdeen. The 301 deaths registered in Glasgow included 2 which were referred to scarlet fever, 7 to diphtheria, 26 to whooping-cough, 3 to enteric fever, and 9 to diarrhoea. Two fatal cases of diphtheria, 5 of whooping-cough, and 3 of diarrhoea were recorded in Aberdeen; 3 of whooping-cough in Paisley; and 2 of diarrhoea in Edinburgh and in Greenock.

HEALTH OF IRISH TOWNS.

DURING the week ending Saturday, January 30th, 730 births and 492 deaths were registered in the twenty-two principal urban districts of Ireland, as against 597 births and 473 deaths in the preceding period. The annual death rate in these districts, which had been 20.4, 21.4, and 21.6 per 1,000 in the three preceding weeks, rose to 22.5 per 1,000 in the week under notice, this figure being 4.5 per 1,000 higher than the mean annual death-rate in the seventy-six English towns for the corresponding period. The figures in Dublin and Belfast were 25.4 and 19.7 respectively, those in other districts ranging from 4.8 in Ballymena and 6.9 in Armagh to 34.3 in Kilkenny and 47.9 in Dundalk, while Cork stood at 25.3, Londonderry at 20.5, Limerick at 17.8, and Waterford at 23.4. The zymotic death-rate in the twenty-two districts averaged 1.6 per 1,000, as against 1.4 per 1,000 in the preceding period.

Naval and Military Appointments.

ROYAL NAVY MEDICAL SERVICE.

THE following appointments have been made at the Admiralty: Fleet Surgeon E. H. MEADEN, to the *Tenedos*, January 25th; Staff Surgeon A. J. LAURIE, to the *Warrior*, January 25th, and on recommissioning, February 22nd; Fleet Surgeon W. G. K. BARNES, M.D., to the *Clyde*; Fleet Surgeon D. J. P. MCNABB, to the Royal Marine Dépôt, Deal, February 17th; Surgeon A. R. FISHER, to the *Jupiter*, February 3rd.

Mr. W. J. J. ARNOLD, civil practitioner, has been appointed Surgeon and Agent at St. Helena.

ARMY MEDICAL SERVICE.

ROYAL ARMY MEDICAL CORPS.

THE undermentioned Captains are promoted to be Majors, dated January 28th: T. H. M. CLARKE, C.M.G., D.S.O., M.B., E. W. P. V. MARRIOTT, S. L. CUMMINS, M.B., P. MACKESSACK, M.B., H. L. W. NORRINGTON. Majors Clarke and Marriott were appointed Surgeon-Lieutenants, January 28th, 1897, and made Captains, January 28th, 1900; Majors Cummins, Mackessack, and Norrington were appointed Surgeon-Lieutenants, July 28th, 1897, and Captains, July 28th, 1900. Their war records are as follow: Major Clarke—Kandia, 1898, being present at the affair of September 8th, when he was slightly wounded (mentioned in dispatches and appointed D.S.O.). Major Cummins—Nile expedition, 1898, and present at the battle of Khartoum (mentioned in dispatches, British medal, and Egyptian medal with clasp); Nile expedition, 1899 (clasp to Egyptian medal); reoccupation of the Bahr-el-Ghazal Province, Soudan, 1900-02); operations at Jebel Jerok in Southern Sennar, Soudan, 1904 (clasp to Egyptian medal). Majors Mackessack and Norrington—Nile expedition, 1898 (British and Egyptian medals).

Lieutenant J. A. CLARK, M.B., from the Seconded List, to be Lieutenant, January 29th. He was appointed on probation, August 1st, 1908.

INDIAN MEDICAL SERVICE.

LIEUTENANT W. H. HAMILTON to be Captain (provisionally), February 1st, 1908. He was appointed Lieutenant, February 1st, 1905.

The retirement from the service of the undermentioned officers, which has been already announced in the BRITISH MEDICAL JOURNAL, has received the approval of the King: Colonel H. B. BRIGGS, Bombay; Lieutenant-Colonel CHARLES MONK, Bombay.

SPECIAL RESERVE.

ROYAL ARMY MEDICAL CORPS.

CAPTAIN GEORGE LANE, from the late Royal Army Medical Corps (Militia), having assented to be transferred, is appointed an officer of the Special Reserve of Officers from September 20th, 1908, retaining the rank and seniority which he held while in the Militia.

TERRITORIAL FORCE.

INFANTRY.

SURGEON-LIEUTENANT J. A. KITE, the Hertfordshire Battalion the Bedfordshire Regiment, resigns his commission, December 22nd, 1908.

ROYAL ARMY MEDICAL CORPS.

Captain R. H. HENDERSON, M.D., resigns his commission, December 11th, 1908.

For Attachment to Units Other than Medical Units.—Surgeon-Lieutenant-Colonel and Honorary Surgeon-Colonel R. DE LA POLE BERESFORD, M.D., from the 2nd Volunteer Battalion the King's (Shropshire Light Infantry), to be Lieutenant-Colonel, with the honorary rank of Surgeon-Colonel, with precedence as in the Volunteer Force, April 1st, 1908. Surgeon-Lieutenant-Colonel and Honorary-Surgeon-Colonel W. PACKER, M D., from the 1st Volunteer Battalion the King's (Shropshire Light Infantry), to be Lieutenant-Colonel, with the honorary rank of Surgeon-Colonel, with precedence as in the Volunteer Force, April 1st, 1908. Lieutenant-Colonel C. DOWNING, from the Welsh Bearer Company, Royal Army Medical Corps (Volunteers), to be Lieutenant-Colonel, with precedence as in the Volunteer Force, April 1st, 1908. Surgeon-Lieutenant W. D. WATSON, from the 1st Essex Royal Garrison Artillery (Volunteers), to be Lieutenant, with precedence as in the Volunteer Force, April 1st, 1908. Surgeon-Lieutenant E. T. COLLINS, from the 2nd Glamorgan Royal Garrison Artillery (Volunteers), to be Lieutenant, with precedence as in the Volunteer Force, April 1st, 1908. Captain G. C. CATHCART, M.B., resigns his commission, December 16th, 1908.

Highland Mounted Brigade Field Ambulance.—Major J. MACDONALD, M.B., to be Lieutenant-Colonel, December 24th, 1908.

Third Highland Field Ambulance.—Captain W. E. FOGGIE, M.B., from the Royal Army Medical Corps, Territorial Force, to be Captain, with seniority from January 29th, 1902; dated April 1st, 1908.

Third West Lancashire Field Ambulance.—Major R. JACKSON, M.B., from the Royal Army Medical Corps, Territorial Force, to be Major, April 1st, 1908; Major R. JACKSON, M.B., to be Lieutenant-Colonel, April 1st, 1908.

UNATTACHED LIST.

Surgeon-Captain W. O. EVANS, from the 2nd Volunteer Battalion the Royal Welsh Fusiliers, to be Captain with precedence as in the Volunteer Force, April 1st, 1908.

ROYAL GARRISON ARTILLERY.

Surgeon-Major H. R. BRAMWELL, M.B., and Surgeon-Captain J. CROMIE, from the Tynemouth Royal Garrison Artillery (Volunteers), are appointed to the Tynemouth unit, with rank and precedence as in the Volunteer Force, April 1st, 1908.

ROYAL ARMY MEDICAL CORPS.

Lieutenant WILLIAM LLOYD resigns his commission, August 17th, 1908.

For Attachment to Units other than Medical Units.—Lieutenant E. T. COLLINS to be Captain, December 23rd, 1908.

Third East Anglian Field Ambulance.—FREDERICK J. REES to be Lieutenant, July 13th, 1908.

Fourth Northern General Hospital.—Captains E. S. WINTER, W. R. HIGGINS, and G. L. H. REVILL to be officers whose services will be available on mobilization, February 3rd.

ROYAL GARRISON ARTILLERY (VOLUNTEERS).

HONORARY ASSISTANT SURGEON J. FORSYTH, 1st Berwickshire, is retired under the conditions of Paragraph 103, Volunteer Regulations, March 31st, 1908.

Surgeon-Lieutenant D. R. MACDONALD, 1st Midlothian, not having signified his wish to serve in the Territorial Force, is struck off the strength of the corps, March 31st, 1908.

VOLUNTEER RIFLES.

SURGEON-LIEUTENANT-COLONEL AND HONORARY SURGEON-COLONEL H. G. THOMPSON, M.D., F.R.C.S.I., 1st Volunteer Battalion the Royal Fusiliers (City of London Regiment), resigns his commission, retaining his rank and uniform, March 31st, 1908.

Surgeon-Captain J. R. RYAN, M.D., 1st Volunteer Battalion the Royal Fusiliers (City of London Regiment), not having signified his wish to serve in the Territorial Force, is struck off the strength of the battalion, March 31st, 1908.

Surgeon-Captain D. D. MONRO, M.B., and Surgeon-Lieutenant JOSEPH HUNTER, M.B., Galloway Volunteer Rifle Corps, not having signified their wish to serve in the Territorial Force, are struck off the strength of the battalion, March 31st, 1908.

Hospitals and Asylums.

BELFAST HOSPITAL FOR SICK CHILDREN.

THE thirty-sixth annual meeting of this institution was held at the hospital, Queen Street, on January 28th. The Lord Bishop presided. Mr. T. S. Kirk, Honorary Secretary to the Medical Staff, read the medical report; 237 medical and 406 surgical patients had been treated in the wards; 375 operations had been performed; in the out-patient department 12,069 attendances had been registered, and 427 operations performed; 28 deaths had occurred in the wards. The general report made feeling reference to the loss the hospital had sustained in the death of Dr. Sidney Brice Smyth, and to the fund of over £1,000 which had been raised by his many friends to endow a cot which was named after him.

MANCHESTER ROYAL EYE HOSPITAL.

THE annual meeting of the Royal Eye Hospital was held last week under the chairmanship of Mr. P. W. Kessler, the chairman of the Board of Management. The report stated that the enlargement of the hospital commenced two years ago was nearly completed, and that part was already occupied. It was not proposed to furnish and equip the whole of the new buildings at once, but to proceed gradually as the needs of the hospital required. The funds subscribed had so far proved insufficient to pay for the whole of the new buildings. Fortunately several legacies and donations of some considerable amount had been received during the period of the construction, and the annual meeting was asked to sanction the use of these for the building fund in order to obviate the necessity of any encroachment on invested funds. The enlarged hospital will require a considerably increased expenditure, probably amounting to £1,200, not only on account of the larger number of patients, but on account of the increased staff that will be necessary. It has been decided to appoint a third house-surgeon, and the nursing and domestic staff will also need reinforcement. The expenditure on the year's working exceeded the income by £358. The subscriptions amounted to £2,135, which was a slight increase. An appeal had been made to the public for £20,000, of which about £15,000 had been received. It was, however, expected that quite £25,000 would be needed altogether. With the enlargement the hospital will be the largest special eye hospital in England, the Moorfields Hospital in London having only 140 beds, compared with 160 in Manchester. The number of out-patients during the year was 31,793, which is a decrease of 850. The number of in-patients admitted was 1,553, an increase of 30. The accident cases treated at the hospitals in Oxford Road and St. John Street amounted to 9,140, which is an average of 29 per day. It was announced that Dr. Glascott, who has been intimately connected with the hospital for over forty years, had been appointed Honorary Consulting Surgeon. Vice-Chancellor Hopkinson said that the position of Manchester was unique in that it possessed a splendid group of hospitals, all in close proximity to the medical school, and he acknowledged, on behalf of the university, the great benefits derived from the opportunities of study in the Eye Hospital given by the Board of Management to the university.

BRADFORD CHILDREN'S HOSPITAL.

THE report presented to the annual meeting of this hospital showed an increase of work in all departments. The total in-patients for the year numbered 635, an increase of 78 on the previous year; and of out-patients there had been an increase of 384 with attendances amounting to 17,457. The average cost per occupied bed was £62 15s. 9d. Continued care was exercised in regard to the admission of patients, and the board was satisfied that there were very few cases of hospital abuse.

DOWN DISTRICT LUNATIC ASYLUM, DOWNPATRICK.

THE annual report for 1907 of Dr. M. J. Nolan, the medical superintendent of this asylum, shows that on January 1st, 1907, there were 721 patients in residence, and that on the last day of the year there were 725. The total number of cases under care during the year was 879, and the average number daily resident 723 as compared with the average of 711 for the previous year. During the year 158 cases were admitted, of whom 123 were first and 35 not-first admissions. The attacks in 64 were first attacks within three and in 24 more within twelve months of admission; in 34 not-first attacks within twelve months of admission; in 23, whether first attacks or not, of more than twelve months, and in 13 of unknown duration on admission. They were classified according to the forms of mental disorder on admission into:—Mania of all kinds, 52; melancholia, 101 (acute melancholia, 61); dementia of all kinds, 9; general paralysis, 4; epileptic insanity, 4; and congenital or infantile defect, 3. The considerable proportion of cases of acute melancholia and the small proportion of the graver forms of mental defect in the above list is noteworthy. As to the principal supposed causal factors which had been operative in these cases, alcohol was assigned in only 11, or 7 per cent.; venereal disease in 2, critical periods in 12, privation and starvation in 5, various bodily diseases in 29, and mental and emotional stress in 17. Hereditary influences were ascertained in 63, or just under 40 per cent., but congenital defect was only recorded as cause of the mental disorder in 1. During the year 71 were discharged as recovered, giving a recovery-rate on the admissions of 44.9 per cent., 8 as relieved, and 1 as not improved. Also 74 died during the year, giving a death-rate on the average numbers resident of 10.2 per cent. The deaths were due in 18 to cerebro-spinal diseases, including 7 deaths from general paralysis; in 50 to chest diseases, with 11 from pulmonary consumption; in 3 to abdominal diseases, and in 3 to cancer. All deaths were due to natural causes.

The asylum was visited by a particularly severe epidemic of influenza, which carried off many senile and feeble cases, and raised the death-rate by 2.5 per cent. as compared with the previous years. There were also a few cases of German measles and one of enteric fever. Both asylum dysentery and pulmonary consumption, however, showed a decline as compared with former years. The Inspector of Lunatics in his report calls attention to the frequency with which zymotic diseases of various kinds visited this asylum, and holds accountable for this the unsatisfactory water supply.

BRIGHTON THROAT AND EAR HOSPITAL.

AT the annual meeting of the governors of this hospital, held on January 30th, the Mayor of Brighton in the chair, it was announced that the number of in-patients in 1908 was 335; number of out-patients 1,575. The total receipts in the general fund were £1,064 14s. 3d., and the total expenditure was £1,035 11s. 2d.

Vacancies and Appointments.

This list of vacancies is compiled from our advertisement columns, where full particulars will be found. To ensure notice in this column, advertisements must be received not later than the first post on Wednesday morning.

VACANCIES.

BATH ROYAL UNITED HOSPITAL.—House-Physician. Salary, £80 per annum.

BRIDGWATER HOSPITAL.—House-Surgeon. Salary at the rate of £80 per annum.

BRIXTON DISPENSARY.—Resident Medical Officer. Salary, £150 per annum.

CHELTENHAM GENERAL HOSPITAL.—Surgeon-in-Charge for Branch Dispensary. Salary, £80 per annum.

CITY OF LONDON HOSPITAL FOR DISEASES OF THE CHEST, Victoria Park, E.—House-Physician (male). Salary at the rate of £50 per annum.

DERBY COUNTY ASYLUM, Mickleover.—Junior Assistant Medical Officer (male). Salary, £120, rising to £150, per annum.

DEVONPORT: ROYAL ALBERT HOSPITAL AND EYE INFIRMARY.—Assistant Resident Medical Officer. Salary at the rate of £50 per annum.

DUDLEY: GUEST HOSPITAL.—Senior Resident Medical Officer. Salary, £100 per annum.

DURHAM COUNTY ASYLUM.—Junior Assistant Medical Officer. Salary, £150, rising to £180, per annum.

EDINBURGH: ROYAL EDINBURGH HOSPITAL FOR SICK CHILDREN.—Four Resident Medical Officers.

HALIFAX: HALIFAX ROYAL INFIRMARY.—Third House-Surgeon. Salary, £80 per annum.

HOSPITAL FOR DISEASES OF THE SKIN, Blackfriars, S.E.—Assistant Surgeon.

KING'S COLLEGE HOSPITAL.—Assistant Clinical Pathologist.

LEEDS GENERAL INFIRMARY.—Ophthalmic House-Surgeon.

LEICESTER INFIRMARY.—Assistant House-Surgeon. Salary at the rate of £60 per annum.

LONDON HOSPITAL, Whitechapel, E.—Medical Registrar. Salary, £100 per annum.

LONDON LOCK HOSPITAL.—House-Surgeon in the Female Hospital. Salary, £100 per annum.

MANCHESTER: ANCOATS HOSPITAL.—Resident House-Surgeon. Salary, £100 per annum.

MANCHESTER HOSPITAL FOR CONSUMPTION.—Assistant Medical Officer and Pathologist. Salary, £60 per annum.

MEDICAL GRADUATES' COLLEGE AND POLYCLINIC, Chenies Street, W.C.—Medical Superintendent. Salary, £100 per annum.

MELROSE: ROXBURGH DISTRICT ASYLUM.—Assistant Medical Officer. Salary, £150 per annum.

MILLER GENERAL HOSPITAL, Greenwich Road.—Honorary Surgeon.

NATIONAL HOSPITAL FOR EPILEPTICS, Bloomsbury, W.C.—Assistant Physician.

NORTHUMBERLAND COUNTY ASYLUM, Morpeth.—Junior Assistant Medical Officer. Salary commencing at £120 per annum.

PLAISTOW: ST. MARY'S HOSPITAL FOR WOMEN AND CHILDREN.—Assistant Resident Medical Officer. Salary at the rate of £80 per annum.

QUEEN'S HOSPITAL FOR CHILDREN, Hackney Road, E.—House-Physician. Salary at the rate of £60 per annum.

QUEENSLAND GOVERNMENT.—Assistant Medical Superintendent of the Lunatic Asylum, Toowoomba. Salary, £400 per annum.

ST. PANCRAS AND NORTHERN DISPENSARY, Euston Road, N.W.—Resident Medical Officer. Salary, £100 per annum.

ST. PETER'S HOSPITAL FOR STONE AND OTHER URINARY DISEASES, Henrietta Street, W.C.—(1) Assistant Surgeon. (2) Junior House-Surgeon. Salary at the rate of £50 per annum.

STAFFORD: STAFFORDSHIRE GENERAL INFIRMARY.—House-Surgeon. Salary, £100 per annum.

TAUNTON: TAUNTON AND SOMERSET HOSPITAL.—(1) Honorary Surgeon. (2) Honorary Dental Surgeon.

VENTNOR: ROYAL NATIONAL HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST.—Male Assistant Resident Medical Officer. Salary, £100 per annum.

WEST LONDON HOSPITAL, Hammersmith Road, W.—Assistant Anaesthetist.

CERTIFYING FACTORY SURGEONS.—The Chief Inspector of Factories announces vacancies at Newport, co. Monmouth, and Callington, co. Cornwall.

APPOINTMENTS.

BERNARD, H. W., M.B., B.Ch.Dub., District Medical Officer of the Tadcaster Union.

BRUNTON, J., M.D.Glas., Certifying Factory Surgeon for the St. Pancras District, co. London.

ONOVAN, W., L.R.C.P. and S.Edin., District Medical Officer of the Birmingham Parish.

FINLAY, Douglas Edward, M.B., B.S.Lond., M.R.C.S., L.R.C.P., Assistant Physician to Gloucester General Infirmary and Gloucestershire Eye Institution.

FREAN, H. G., M.B., B.C.Cantab., District Medical Officer of the Abingdon Union.

GORDON, J. E., M.D., Medical Superintendent to the Devon and Cornwall Sanatorium.

SAWDON, F. R., M.B., Ch.B.Vict., District Medical Officer of the Chapel-en-le-Frith Union.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting announcements of Births, Marriages, and Deaths is 3s. 6d., which sum should be forwarded in post-office orders or stamps with the notice not later than Wednesday morning, in order to ensure insertion in the current issue.

BIRTH.

HOAR.—On December 18th, 1908, at Bolarum, Deccan, India, the wife of J. E. Hoar, R.A.M.C., of a son.

MARRIAGE.

STEWART—MITCHEL.—On Tuesday, February 2nd, 1909, at the Church of All Saints, Margaret Street, W., by the Rev. Edward H. Mosse, M.A. (cousin of the bridegroom), James Stewart, B.A., Q.U.Belf., F.R.C.P.Ed., ex-Surgeon R.N., of 24, Welbeck Street, W., and only son of the late Robert Stewart, M.D. (Medical Superintendent of the Belfast District Asylum), to Edith Albertha, second daughter of the late George Haslett Mitchel, Esq., of "St. Helen's," Buncrana, co. Donegal.

DEATH.

READ.—On January 28th, suddenly, at 11, Petersham Terrace, S.W., Thomas Laurence Read, M.R.C.S., aged 76 years.

DIARY FOR THE WEEK.

MONDAY.

MEDICAL SOCIETY OF LONDON, 11, Chandos Street, Cavendish Square, W., 9 p.m.—Clinical Evening. Cases will be in attendance at 8 p.m.

ROYAL COLLEGE OF SURGEONS OF ENGLAND, Lincoln's Inn Fields, W.C., 12 noon.—Museum Demonstration by Professor Shattock: Osteoplastic Inflammation of Bone.

TUESDAY.

BRITISH MEDICAL BENEVOLENT FUND.—Meeting at the Royal College of Physicians, London, Sir John Tweedy in the chair. Address by the Bishop of Oxford (Dr. Paget).

ROYAL SOCIETY OF MEDICINE:

SURGICAL SECTION, 20, Hanover Square, W., 5.30 p.m.—Papers:—Mr. J. F. Dobson and Mr. J. Kay Jamieson: The Lymphatics of the Colon. Mr. Rickman J. Godlee: The Torus Palatinus.

WEDNESDAY.

ROYAL SOCIETY OF MEDICINE:

MEDICAL SECTION, 20, Hanover Square, W., 5.30 p.m.—Discussion on Ulcerative Colitis (adjourned from January 26th) will be continued by Sir Patrick Manson.

UNITED SERVICES MEDICAL SOCIETY, Royal Army Medical College, Millbank, S.W., 5 p.m.—Clinical Demonstrations.

THURSDAY.

OPHTHALMOLOGICAL SOCIETY OF THE UNITED KINGDOM, 11, Chandos Street, Cavendish Square, W., 8 p.m.—Clinical Evening: (1) Mr. N. Bishop Harman—(*a*) Finished Models of the Diaphragm Test; (*b*) Tobacco Amblyopia—a Substitute for Smoking. (2) Mr. A. Levy: Obstruction of Cilio-Retinal Artery. (3) Mr. J. F. Cunningham: A Case of Aniridia. (4) Mr. E. Nettleship: Ophthalmoscopic Drawings.

ROYAL SOCIETY OF MEDICINE:

OBSTETRICAL AND GYNAECOLOGICAL SECTION, 20, Hanover Square, W., 7.45 p.m.—Specimens:—Dr. Herbert Spencer: A Venous Aneurysm on a Uterine Fibroid. Mrs. Stanley Boyd: A Necrobiotic Fibroid. Dr. Victor Bonney: A Modification of Champetier de Ribes's Bag. Dr. F. E. Taylor: A Uterus with Two Interstitial Fibroids, one showing Red Degeneration, the other Normal. Dr. Drummond Maxwell: Notes on a Case of Toxic Vomiting and Pregnancy. Short Communications:—Dr. F. J. McCann: Sarcoma of the Fallopian Tubes. Dr. Russell Andrews: Some Cases of Vesicular Mole in Combination with Ovarian Cysts, together with Cases Recorded. Paper:—Dr. G. F. Blacker: A Case of Hydatidiform Mole, with Albuminuria of Kidney and Pregnancy; Sudden Death from Cardiac Failure.

FRIDAY.

ROYAL SOCIETY OF MEDICINE:

CLINICAL SECTION, 20, Hanover Square, W., 8 p.m.—Cases:—Dr. H. Morley Fletcher: Cases of Oxycephaly. Dr. Herbert P. Hawkins: Case of Leprosy. Mr. W. Sampson Handley: Elephantiasis Treated by Lymphangioplasty. Mr. P. M. Heath: (1) Diffuse Periostitis of both Tibiae without other Evidence of Congenital Syphilis. (2) Congenital Syphilitic Knee. Dr. F. Parkes Weber: (1) Congenital Swelling of the Hands (Trophoedema). (2) Congenital Splenomegaly and Acholuric Jaundice. Dr. F. J. Poynton: Amaurotic Family Idiocy. Dr. M. Macnaughton-Jones, jun.: An Automatic Appliance for Maintaining Pressure in carrying out Bier's Treatment. Mr. R. Higham Cooper: Acromegaly with Unusual Bone Changes. 8.30 p.m. Mr. Butlin will exhibit his collection of drawings of Early Carcinoma of the Tongue, and of conditions which may be mistaken for it; and will speak of the results of operations which have been practised in the cases exhibited. Microscopic sections of the cases will be on view. 9.40 p.m. Mr. R. J. Godlee will describe a case of Dermoid Cyst of the Mediastinum treated by operation, and will illustrate the subject of this operation by a pathological specimen from another case.

POST-GRADUATE COURSES AND LECTURES.

CENTRAL LONDON THROAT AND EAR HOSPITAL, Gray's Inn Road, W.C.—Tuesday, 3.45 p.m.: Lecture on Tracheoscopy. Friday, 3.45 p.m.: Lecture on Clinical Pathology.

HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST, Brompton, S.W.—Wednesday, 4 p.m., Mediastinal Tumours.

LONDON SCHOOL OF CLINICAL MEDICINE.—Daily arrangements: Out-patient Demonstrations, 10 a.m.; Medical and Surgical Clinics, 2.15 p.m. and 3.15 p.m. respectively; Operations, 2 p.m. Special Clinics: Ear and Throat, at noon and 4 p.m., Monday, and noon, Thursday; Skin, at noon and 4 p.m., Tuesday, and noon, Friday; Eye, 11 a.m., Wednesday and Saturday; Radiography, 4 p.m., Thursday. Special Lectures: Wednesday, 3.30 p.m., Orbital Cellulitis. Thursday, 2.30 p.m., Jaundice.

MEDICAL GRADUATES' COLLEGE AND POLYCLINIC, 22, Chenies Street, W.C.—The following Clinical Demonstrations have been arranged for next week at 4 p.m. each day:—Monday, Skin. Tuesday, Medical. Wednesday, Surgical. Thursday, Surgical. Friday, Throat. Lectures at 5.15 p.m. each day will be given as follow:—Monday: Trigeminal Neuralgia and its Treatment by Schlosser's Method. Tuesday: The Diagnosis and Treatment of Pus Formation in Appendicitis. Wednesday: Treatment of Psoriasis. Thursday: Perforating Ulcer of the Colon.

NATIONAL HOSPITAL FOR THE PARALYSED AND EPILEPTIC, Queen Square, W.C.—Tuesday, 3.30 p.m., Treatment in Nervous Diseases. Friday, 3.30 p.m., The Significance of Tremor.

NORTH-EAST LONDON POST-GRADUATE COLLEGE, Prince of Wales's General Hospital, Tottenham, N.—Monday, Clinics, 10 a.m., Surgical Out-patient, 2.30 p.m., Medical Out-patient; Nose, Throat, and Ear; *X* Rays; 4.30 p.m., Medical In-patient. Tuesday, 10 a.m., Medical Out-patient Clinic; 2.30 p.m., Operations; Clinics: Surgical, Gynaecological; 4.30 p.m. Special Demonstration of Medical Cases. Wednesday, 2.30 p.m., Medical Out-patient, Skin, and Eye Clinics. Thursday, 2.30 p.m., Gynaecological Operations; Clinics: Medical Out-patient, Surgical Out-patient, *X* Rays; 3 p.m., Medical In-patient; 4.30 p.m. Lantern Lecture: Applied Anatomy of the Breast and Diseases of the Male Breast. Friday, Clinic: 10 a.m., Surgical Out-patient; 2.30 p.m., Operations; Clinics: Medical Out-patient, Eye; 3 p.m., Medical In-patient.

POST-GRADUATE COLLEGE, WEST LONDON HOSPITAL, Hammersmith Road, London, W.—The following are the arrangements for next week:—Daily, 2 p.m.: Medical and Surgical Clinics; *X* Rays. 2.30 p.m.: Operations. Monday and Thursday and Wednesday and Saturday, at 2 p.m.: Diseases of the Eyes. Tuesday and Friday, 10 a.m.: Gynaecological Operations. 2 p.m. (Wednesday and Saturday, 10 a.m.): Diseases of Throat, Nose, and Ear; 2.30 p.m., Diseases of the Skin. Wednesday and Saturday: Diseases of Children, at 10 a.m.; 2.30 p.m., Diseases of Women. Lectures: At 10 a.m., Monday and Thursday, Surgical Registrar, Demonstration of Surgical Cases. Friday, Medical Registrar, Demonstration of Medical Cases. At 12 noon, Monday, Pathological Demonstration. At 12.15 p.m., Wednesday and Saturday, Practical Medicine. At 5 p.m., Monday, Diagnosis of Swellings of Jaws. Tuesday, Diagnostic Signs in Organic Diseases of Nervous System. Spinal Cord. Wednesday, Medicine. Thursday, Cases of Eye Disease. Friday, Cases of Skin Disease.

ST. JOHN'S HOSPITAL FOR DISEASES OF THE SKIN, Leicester Square, W.C.—Thursday, 6 p.m., Treatment of Syphilis.

CALENDAR OF THE ASSOCIATION.

Date.	Meetings to be Held.
FEBRUARY.	
7 Sunday ..	
8 MONDAY ..	
9 TUESDAY ..	LONDON: Subcommittee of Science Committee on Development of Scientific Work of Divisions and Branches, 11 a.m. LONDON: Capitation Grants Subcommittee, 1.30 p.m. LONDON: Medico-Political Parliamentary Subcommittee, 3 p.m. LONDON: Uterine Cancer Committee, 5 p.m. MANCHESTER (WEST) DIVISION, *Lancashire and Cheshire Branch*, Technical Institute, Stretford Road, Old Trafford, 4 p.m.
10 WEDNESDAY	LANCASHIRE AND CHESHIRE BRANCH, Branch Council, Medical Institution, Liverpool, 4.30 p.m. LEICESTER AND RUTLAND DIVISION, *Midland Branch*, Leicester Infirmary, 4 p.m. RICHMOND DIVISION, *Metropolitan Counties Branch*, Royal Hospital, Richmond, 8.30 p.m.
11 THURSDAY ..	BEDFORD AND HERTS DIVISION, *South Midland Branch*, Bedford County Hospital, Bedford, 3 p.m. BIRMINGHAM BRANCH, Medical Institute, Edmund Street, 3.30 p.m.
12 FRIDAY ..	
13 SATURDAY ..	FOLKESTONE DIVISION, *South-Eastern Branch*, Hotel Wampach, Folkestone, 8.15 p.m. LEINSTER BRANCH, Annual General Meeting, Royal College of Physicians, Kildare Street, Dublin, 4.30 p.m.; Annual Dinner, in the College Hall, 7.30 p.m.
FEBRUARY *(Continued).*	
14 Sunday ..	
15 MONDAY ..	
16 TUESDAY ..	LONDON: Standing Ethical Subcommittee, 2 p.m.
17 WEDNESDAY	ALTRINCHAM DIVISION, *Lancashire and Cheshire Branch*, Brooklands Hotel, 5 p.m. CARDIFF DIVISION, *South Wales and Monmouthshire Branch*, Cardiff.
18 THURSDAY ..	LAMBETH DIVISION, *Metropolitan Counties Branch*, Guy's Hospital, 4 p.m.
19 FRIDAY ..	
20 SATURDAY ..	
21 Sunday ..	
22 MONDAY ..	
23 TUESDAY ..	HAMPSTEAD DIVISION, *Metropolitan Counties Branch*, Business Meeting.
24 WEDNESDAY	BATH AND BRISTOL BRANCH, Bath.
25 THURSDAY ..	STAFFORDSHIRE BRANCH, General Meeting, North-Western Hotel, Stafford, 5.15 p.m.; Dinner, 7.15 p.m. CITY DIVISION, *Metropolitan Counties Branch*, Clinical Meeting, Queen's Hospital for Children, Hackney Road, 4 p.m.
26 FRIDAY ..	BIRMINGHAM BRANCH, Pathological and Clinical Section, Medical Institute Edmund Street, 8 p.m. EDINBURGH BRANCH, Winter Clinical Meeting, Royal Infirmary, Edinburgh, 4 p.m.; Museum open 11 a.m.; Dinner, Royal British Hotel, Princes Street, 6.30 p.m.
27 SATURDAY ..	
28 Sunday ..	

MEMBERSHIP OF THE BRITISH MEDICAL ASSOCIATION.

THE British Medical Association exists for the promotion of medical and the allied sciences, and the maintenance of the honour and the interests of the medical profession.

The Annual Subscription to the British Medical Association is £1 5s. 0d., and the BRITISH MEDICAL JOURNAL is supplied weekly, post free, to every member of the British Medical Association, wherever he may reside.

Forms of application for membership can be obtained from the General Secretary, 429, Strand, W.C.

The principal rules governing the election of a medical practitioner to be a member of the British Medical Association are as follow:

Article III.—Any Medical Practitioner registered in the United Kingdom under the Medical Acts and any Medical Practitioner residing within the area of any Branch of the Assotion situate in any part of the British Empire other than the United Kingdom, who is so registered or possesses such medical qualifications as shall, subject to the regulations, be prescribed by the Rules of the said Branch, shall be eligible as a Member of the Association. The mode and conditions of election to Membership shall from time to time be determined by or in accordance with the By-laws. Every Member, whether one of the existing Members or a subsequently-elected Member, shall remain a Member until he ceases to be a Member in accordance with the provisions hereof.

By-law 1.—Every candidate for Membership of the Association shall apply for election in writing, addressed to the Association, and stating his agreement, if elected, to abide by the Regulations and By-laws of the Association, and the Rules of such Division and Branch to which he may at any time belong, and to pay his subscription for the current year.

By-law 2.—Every candidate who resides within the area of a Branch shall forward his application to the Secretary of such Branch. Notice of the proposed election shall be sent by the Branch Secretary to the General Secretary of the Association, and to every Member of the Branch Council, and the candidate, if not disqualified by any Regulation of the Association, may be elected a Member of the Association by the Branch Council at any meeting thereof held not less than seven days (or such longer period as the Branch may by its Rules prescribe) after the date of the said Notice. A Branch may by special Resolution require that each candidate for election to the Association shall furnish a certificate from two Members of the Association to whom he is personally known. Officers of the Navy, Army, and Indian Medical Services on the Active List are eligible for election through the Council or a Branch without approving signatures as laid down in By-law 3.

By-law 3.—Every candidate whose place of residence is not included in the area of any Branch shall forward his Application to the General Secretary of the Association, together with a statement signed by three Members of the Association, that from personal knowledge they consider him a suitable person for election. Notice of the proposed election shall be sent by the General Secretary to every Member of the Council, and the candidate, if not disqualified by any Regulation of the Association, may be elected a Member of the Association by the Council at any meeting thereof held not less than one month after the date of the said notice.

The annual subscription to the BRITISH MEDICAL JOURNAL for non-members is £1 8s. 0d. for the United Kingdom, and £1 15s. 0d. for abroad.

Printed and Published by the British Medical Association at their Office, No. 429, Strand, in the Parish of St. Martin-in-the-Fields, in the County of Middlesex.